



CITY OF DE PERE HEALTH DEPARTMENT
 335 S. Broadway St. De Pere, WI 54115-2593
 ☎ 920-339-4054 📠 920-339-2745 Email: deperhealth@deperewi.gov



Wis. Stats. 97.30, WI Admin Code ATCP 75 and De Pere Municipal Ordinance Chapter 106

APPLICATION FOR TEMPORARY RESTAURANT LICENSE

Before completing this application, read “Temporary Food Stands: Key Points”

Completed applications should be received (with all applicable fees) by the City of De Pere Health Department at least 1 week before the event.

Name of Organization:			Contact Person:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Phone:			Phone:		
Email:			Email:		
Use this address for mailing permit → <input type="checkbox"/>			Use this address for mailing permit → <input type="checkbox"/>		

All Temporary Restaurant Licenses expire annually on June 30th.

Non- Profit Organizations Only

Qualifying non-profit organizations under Wisconsin Administrative Code includes churches, service clubs and religious, youth, patriotic and civic organizations. A Temporary Restaurant License must be obtained when an organization operates for more than 3 days during a licensing year. Licensing year runs July 1st to June 30th.

List the Events Planning to attend for the License Year

Dates	Event Name	Location of Event	Time

MENU: List all foods and beverages that will be served (please list or attach menu)

How will the foods be held cold (at or below 41°F)?

How will the foods be held hot (at or above 135°F)?

Will all foods be prepared at the temporary food service booth? Yes No

If No, then please indicate what other locations will be used to prepare foods. List: _____

No home prepared foods except limited bake sale items are allowed. Call with questions.

No home butchered meats or home canned/ home processed foods are allowed.

All foods must come from a commercial approved source or a licensed facility.

How will employees wash their hands?

How will employees handle foods?

How will food temperatures be monitored?

How will condiments be protected from contamination?

How will food contact surfaces (utensils/containers/counters) be cleaned and sanitized?

Temporary Restaurant License Fee: \$168.00 (non-refundable)

Make checks payable to: City of De Pere Health Department
335 S. Broadway
De Pere, WI 54115

Phone: 920-339-4054

I certify that I am familiar with the Temporary Food Service Requirements – as required in the Wisconsin Food Code and the described establishment will be operated and maintained in accordance with applicable regulations.

The License must be posted in public view when the temporary restaurant is in operation.

Applicant's Printed Name

Applicant's Signature

Date

THIS APPLICATION FEE IS NON REFUNDABLE.

(Office Use Only)

Application Date: _____ **Amount Paid:** \$ _____ CASH CHECK **Receipt #** _____

Date Permit Issued: _____ **License Year** _____